

07/11/01  
31042 U.S. Pat. & TM. Off.

07-12-01

A

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	3056
First Inventor	BURKE
Title	UNIVERSAL ANTI-VIRAL COMP.
Express Mail Label No.	ET 320080584 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit on original and a duplicate for fee processing)
- ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
- ☒ Specification [Total Pages 25]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets 0]
- ☐ Oath or Declaration [Total Pages 25]
  - ☒ Newly executed (original or copy)  
Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
  - ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Box Patent Application  
Washington, DC 20231

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - ☐ Computer Readable Form (CRF)
  - Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☐ paper
  - ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
- ☐ English Translation Document (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
- ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP)

of prior application No. 09, 281,391  
Group Art Unit 1623

Prior application information:

Examiner

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)				or	<input type="checkbox"/> Correspondence address below
Name	JOHN LEZDEY					
Address	1409 NORTH FT HARRISON					
	SUITE A					
City	CLEARWATER	State	FLORIDA	Zip Code	33755	
Country	US	Telephone	727-441-1880	Fax	727-441-1887	

Name (Print/Type)	JOHN LEZDEY	Registration No. (Attorney/Agent)	22735
Signature	John Lezdey	Date	7/10/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SD/17 (12-97)

Approved for use through 6/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

**FEE TRANSMITTAL**Note: Effective October 1, 1997.  
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 710

**Complete if Known**

Application Number

Filing Date

First Named Inventor

Group Art Unit

Examiner Name

Attorney Docket Number

7-001  
BVRKE  
  
  
  
3056**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Account  
Number  
Deposit  
Account  
Name

12-1217

- ☒
- Charge Any Additional
- 
- Fee Required Under
- 
- 37 CFR 1.18 and 1.17

- ☒
- Charge the Issue Fee Set in
- 
- 37 CFR 1.18 at the Making of the
- 
- Notice of Allowance

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Money  
Order ☐ Other**FEE CALCULATION****1. FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 790	201 395	Utility filing fee	710
106 350	200 165	Design filing fee	
107 640	207 270	Plant filing fee	
108 750	208 395	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$) 710

**2. CLAIMS**

Total Claims	Extra	Fee from below	Fee Paid
18 - 20 =	0	X	0
Independent Claims	3 - 3 =	0	0
Multiple Dependent Claims	0	X	0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 22	203 11	Claims in excess of 20
102 82	202 41	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim
100 82	209 41	Reissue independent claims over original patent
110 22	210 11	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or cash	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
138 130	138 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 950	217 475	Extension for reply within third month	
118 1,510	218 755	Extension for reply within fourth month	
128 2,000	228 1,030	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,320	241 660	Petition to revive - unintentional	
142 1,320	242 660	Utility issue fee (or reissue)	
143 460	243 225	Design issue fee	
144 670	244 335	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
125 240	125 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 780	246 395	Filing a submission after final rejection (37 CFR 1.129(a))	
149 790	249 395	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 0

**SUBMITTED BY**Typed or  
Printed Name

John LEZDEY

Signature

John Lezdey

Date

7/10/01

**Complete (if applicable)**

Reg. Number

22735

Deposit Account  
User ID

12-1217

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.